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ABSTRACT

This report provides background information needed for a determination of the feasibility of establishing a program to train dental hygienists and dental assistants at Luzerne County Community College, and presents data needed to design such a program in a comprehensive community college. Information presented describes: the constituency and functions of a dental auxiliary advisory committee, program objectives and characteristics, curriculum content and course descriptions, personnel and budget requirements, program administration needs, facility needs, and accreditation and licensing requirements. In addition, findings of a labor market survey of all Luzerne County dentists are presented. Respondents reported the number of dental auxiliaries currently employed, their immediate needs for additional dental auxiliaries, and their anticipated needs over the next three years. Seventy-seven percent of the respondents indicated that they would prefer to employ a college trained assistant to training one themselves. An analysis of an existing dental auxiliary education program at another Pennsylvania community college is included, and the survey instrument is appended. (Author/DC)

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Feasibility Study for the Establishment of a Dental Auxiliary Education Program

by

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INTRODUCTION

Luzerne County Community College recognizes that allied health educational programs bring to a community one very important means of providing more effective use of professionl health manpower. Recent studies show that the effective use of dental auxiliaries can allow a dentist, in at least a two-chair office, to almost double the number of his patients.

The need for more efficient and effective dental care delivery is urgent and grows daily. Not only are there not enough dentists being trained, but a larger percentage of the total population is seeking dental service today than ever before. By 1980 the active dental force will grow by some 15,000 dentists to reach 101,000. But, by that time, there will only be approximately one dentist for every 2,600 persons, compared with 1 for every 2,100 in 1963.

This prospect of the dental force being unable to provide needed services, combined with the higher levels of dentist productivity made possible through the use of well-trained dental auxiliaries, has given added impetus to the demand for dental auxiliary educational programs.

The purposes of this study are (1) to provide the needed background information regarding whether or not it is feasible for Luzerne County Community College to establish a dental auxiliary education program to meet the above mentioned demand for such programs, and (2) to provide the information necessary to design such a program in a comprehensive community college. With regard to this, information has been provided on program objectives, curriculum content, personnel and budget requirements, facilities needs, and accreditation requirements.

The writer recognizes the special assistance received in the preparation of this study from Dr. Byron L. Rine-

himer, Jr., President of Luzerne County Community College who, although not being President when the study was initiated, upon becoming President in April, 1974, gave his full support and encouragement to those on the staff involved in the study. These staff members, whose assistance is also greatly appreciated, include Mr. Robert S. Galardi, Director of Business and Finance, Mr. Steve Kohut, Comptroller and Coordinator of Federal Programs, and Dr. Byron Myers, Dean of Academic Services.

The study consultants, Dr. William A. Connor, Dean of Career and Continuing Education, and Mrs. Carolyn Harbourt, Director of the Dental Hygiene Program, both from Northampton County Area Community College, Bethlehem, Pa., provided expert advice, assistance, and timely reports, and deserve a large amount of the credit for the study's comprehensiveness.

Several area dentists provided much cooperation, support, and expert counsel. Noteworthy among these are Dr. Robert F. Goulstone, Dr. William R. Dykins, Dr. Leonard A. Sergott, Dr. Alfred DeRenzis, Dr. Joseph P. Krischunis, and Dr. Richard C. Rushmore. Their continuing strong commitment and that of their colleagues will be invaluable assets to the proposed program.

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Assistant to the President

Luzerne County Community College
September, 1974

SUMMARY

FACTORS AFFECTING THE ESTABLISHMENT OF DENTAL AUXILIARY EDUCATION PROGRAM AT LUZERNE COUNTY COMMUNITY COLLEGE

There seems to be a definite need for and interest in the establishment of a dental auxiliary education program at Luzerne County Community College. The need is revealed by the results of the labor market survey (see Section XII) and the strong support and cooperation pledged by the county dental societies (see Appendix V). Also, there are no comparable programs offered in Northeastern Pennsylvania and none are anticipated (see Section XIII).

Establishment of a dental auxiliary education program is consistent with the general purposes and aims of the College. One of the established functions of a community college is to provide the kinds of educational programs needed by the youth and adults of a community which are not being adequately provided, at reasonable cost, by existing educational institutions in the area. The Community College Act of 1963 of the Commonwealth of Pennsylvania authorizes community colleges to offer programs of semi-professional and technical health education.

There is adequate student enrollment potential to support a dental auxiliary education program at the College. The proposed dental program, if it meets with the same type of success of similar programs, will attract more students than it can accommodate (see Section XI). The appeal and academically demanding content of the program require a special set of admission standards to insure program and student success (see Section V., B., 8).

There is a strong national demand for dental auxiliary

teaching staff, therefore, the staffing of the program should receive immediate attention. Currently there are more colleges and universities seeking dental auxiliary teachers than there are staff available to fill the positions (see Section X). Because of this, the College should investigate all possible options for obtaining qualified staff as soon as a decision is made regarding the implementation of a dental education program.

Classroom, general laboratory, and administrative space for a dental program is available at the College. General education classrooms, space for a dental laboratory, fully equipped science laboratories, and offices for the program direstor and staff are presently available in the College's new facility.

Adequate and accessible clinical facilities are available to the College. Special efforts and arrangements can be made to utilize the clinical facilities of the Veterans Administration Hospital and/or those of the Rural Health Corporaton. A number of options are available to the College — it can effect a cooperative arrangement with an existing clinical facility and, hopefully, begin a dental assisting program within one year, or it can delay beginning a program until grant applications have been filed, approved, and funded for construction and equipping of a dental assisting/dental hygiene clinic at the College, or it can do both. **Recommendation** -- the College should explore in depth the funding possibilities for development of its own clinical facility, while, at the same time, making arrangements to begin a dental assisting program in a cooperating clinical facility. This latter course should be pursued with the understanding that should the College receive sufficient funding to construct its own facility, it would only continue the cooperative program until the entire program can be accommodated on the College campus.

The College has adequate student personnel services

for the program's students. Recent re-organization of the College's student counseling services will allow for inclusion of the dental auxiliary students without the need for additional staff. Through the use of three general counselors, one placement counselor, one admissions counselor, one student activities counselor, a half-time financial aid counselor, and the Dean of Student Services, the College can provide for the new students' specialized counseling needs. Recently inaugurated faculty advisement and peer counseling services can provide the needed academic counseling.

The College could finance a Cooperative Dental Assisting Education Program on the basis of the following conditions and assumptions: (1) the program would be offered utilizing the clinical facilities of a cooperating instituton at little or no cost for facility usage; (2) twenty-four (24) new students would be enrolled each year; (3) fifty (50) per cent of the initial equipment cost of $20,000.00 would be supported by outside grant monies available or, if such monies cannot be obtained, through funds provided by Luzerne County; and (4) the additional enrollment by the program students in the required general education courses can be absorbed by the College's current course offerings and available staff. The College would need a written agreement detailing the conditions of the cooperative arrangement.

The College could finance a Combined Dental Assisting/Dental Hygiene Education Program on the basis of the following conditions and assumptions: (1) the program would enroll forty-eight (48) students the first year and sixty-five (65) students the second year (assuming 25-30 per cent attrition rate in dental hygiene program from first to second year); (2) fifty (50) per cent of the initial $432,000 construction and equipment costs for a dental auxiliary education facility at the College would be provided by outside grant monies available or, if such monies

cannot be obtained, through funds provided by Luzerne County; and (3) the College could absorb the cost of providing the extra services of one full-time equivalent faculty member to teach the additional general education courses required by the program enrollment.

More detailed budget information can be found in Appendices VIII and IX.

I.

RATIONALE FOR STUDY

Interest in the establishment of dental auxiliary training programs at Luzerne County Community College (LCCC) dates back to April, 1967, when the College requested information regarding the basic requirements for such programs from the American Dental Association Council on Dental Education. In September, 1968 a proposal for a Dental Assistant curriculum was presented to the College President. The curriculum was not implemented, however, because of financial and space limitations at the College's temporary facilities in Wilkes-Barre.

Renewed interest in dental auxiliary training became evident in January, 1970, with the publication of the College's "Curriculum Feasibility Study." The recommendations from this study, which were incorporated in the College's **Ten-Year Master Plan,** included the offering of "Dental Auxiliary Technology" during the initial building phase of the College's permanent campus facilities.

In November, 1972, when the final square footage allocations for the permanent campus were reviewed by the College's Board of Trustees, 1050 square feet were included for a dental laboratory. However, because a dental auxiliary training program requires in-depth study of (1) the instructional resources needed and (2) the local demand for program graduates, it wasn't until October, 1973, that a grant proposal was submitted to underwrite the cost of such a study. The proposal was for use of Federal funds made available under the Vocational Education Amendments of 1968, Public Law 90-576, and the grant was approved on February 1, 1974. Later that month two consultants on dental education were retained by the College from Northampton County Area Community College: Dr. William A. Connor, Dean of Career and Continuing

Education, and Mrs. Carolyn Harbourt, Director of the Dental Hygiene Program. Dr. Connor and Mrs. Harbourt, both involved in an accredited dental education program, provided program and manpower information and analysis, and Dr. Connor, upon completion of the first draft of the study, provided analysis and recommendations regarding the overall effectiveness of the study.

INVOLVEMENT OF AREA DENTISTS

In March of 1974, meetings were held with representatives from the Wilkes-Barre, Hazleton, and Scranton District Dental Societies. The purpose of these meetings was to secure each Society's endorsement of and involvement in the study and in a survey of labor market needs for dental auxiliaries in the Luzerne-Lackawanna area (a copy of the resultant survey form is included as Appendix I). The dental societies' representatives provided support and encouragemnt and the survey was mailed during the last week of April. An analysis of the survey results is included in Section XII, pages 37-39.

The involvement of area dentists proved to be highly beneficial, both in terms of the survey design and in terms of survey coverage, as each dental society volunteered the use of its mailing list. Later, after the surveys were returned and the results were collated, a follow-up meeting with dental society and College representatives was held to analyse the survey results. This initial liaison will be continued through the establishment of the Dental Auxiliary Advisory Committee, which will have proportionate representation from the Luzerne County dental societies and, also, a representative from the Scranton District Dental Society.

COMMUNITY COLLEGE PROGRAM GUIDELINES

According to the "Guidelines for the Establishment of Public Community Colleges in Pennsylvania," published

by the Department of Education in 1965, a community college should provide the kinds of educational programs needed by the youth and adults of that community which are not being adequately provided, at reasonable cost, by existing educational institutions.[1] In determining a community's educational program needs, educational and manpower surveys are normally utilized. Such surveys, conducted in Luzerne County and in Pennsylvania in 1966, 1968, 1969, and 1974 indicate an interest in and the need for educational programs for dental auxiliaries.[2]

The Community College Act of 1963 of the Commonwealth of Pennsylvania authorizes community colleges to offer educational programs in a number of areas, and one of these areas is that of semi-professional and technical health education.

[1] Please refer to page 49 for a complete listing of all reference notes.

II.

ESTABLISHMENT OF DENTAL AUXILIARY ADVISORY COMMITTEE

If Luzerne County Community College decides to accept the recommendations of this study and proceed toward implementation of a Dental Auxiliary Education Program(s), a Dental Auxiliary Advisory Committee should be formed. Included in its membership should be a number of general dentists, and at least three specialists to include orthodontics, periodontics, dental surgery, and pedodontics. The general dentists selected should be from both large and small practices. In addition, there should be representatives from the ranks of area dental assistants and/or dental hygienists, and a consumer representative from the general public. Also, a local representative from the Department of Health who has responsibility for local public health dental screenings should be on the committee. A major function of this committee would be to establish and maintain liaison with the local dental societies and local dental auxiliary associations. To provide maximum immediate liaison, it might be well if the College selected its auxilary representatives from the officership of the local Dental Assistants and/or Dental Hygienists Association.

The membership on this committee should have designated terms, allowing for turnover on the committee, thereby providing the College with new ideas and new responses to the changing needs of the dental profession. The Advisory Committee should meet at least three times annually on the call of an assigned college administrator, with minutes being kept of each Advisory Committee meeting, circulated among its membership and maintained at the College as a permanent record. The proposed functions of the Dental Auxiliary Advisory Committee are included as Appendix II.

III.

PROGRAM CHARACTERISTICS AND PURPOSES

A. **Dental Hygiene Program** — The Dental Hygiene Program should be a two year associate degree offering consisting of at least 60 college credit hours of general education and specialty skill training. The general education component in the program is essential, given the fact that the practicing dental hygienist must be a contributing member of a dental team functioning not only technically but in a social environment within her place of employment and in her community.* On this basis, a general education component consisting of humanities and social sciences is recommended to insure that the graduated hygienist is a full and contributing member not only to her profession, but to society.

The purpose of the Dental Hygiene Program would be to prepare competent practicing dental hygienists for the Luzerne County region. The College should look beyond the needs of its immediate service area and attempt to plan a program which would meet the labor market needs of a wide regional area. Programs planned and offered within small geographical areas will soon saturate the labor market need for such trained specialists, thereby reducing the justification for the maintenance of this expensive allied health program over a span of years.

The Council on Dental Education of the American Dental Association provides the following general guidelines regarding the administration of a dental hygiene education program:

> The dental hygiene program should be a recognized entity within the institution's administrative structure. It

* In this study, dental auxiliaries will be referred to as feminine, although dental education programs are open to members of both sexes.

is expected that the position of the program in the administrative structure will be consistent with that of other parallel programs and that the administrator will have authority, responsibility and privileges equal to those of other program administrators. There should be provision for direct communication between the program administrator and institution administrators who are responsible for decisions that directly affect the program.

It is important that there be opportunities for dental hygiene faculty representation on institution-wide committees and that the program administrator be consulted when matters directly related to the dental hygiene program are considered by committees that do not include hygiene faculty.[3]

Additional guidelines regarding facilities, faculty, curriculum, financial support, accreditation, and admissions requirements are included under appropriate headings throughout the remainder of the study.

B. **Dental Assisting Program** — The Dental Assisting Program should either be a one year certificate or a two year associate degree program, depending on the philosophy of the parent institution and the particular needs of the labor market the program will serve. The purposes of the Dental Assisting Program are similar to those of Dental Hygiene. The program graduate should be a competent practicing dental assistant, qualified to fill team positions in dental offices in the greater Luzerne County area. The requirements for an accredited Dental Assistant Education Program are mandated by the Council on Dental Education of the American Dental Association, and appropriate references to these will be made throughout the remainder of this study.

Of considerable importance is the question of how much attention will be given in the curriculum to the presentation of Advanced Functions in dentistry (expanded duties for auxiliaries). The Council on Dental Education of the American Dental Association specifies that pro-

grams should meet minimum Council requirements before they embark on instruction in Advanced Functions.[4] This suggests that an educational program which decides that it will prepare not only a traditional assistant, but one who is also competent in Advanced Functions, needs greater time to achieve this objective. Further, if the Dental Assisting Program is to be organized in a kind of career lattice arrangement with Dental Hygiene, the need for common courses emerges. On this basis, the sponsoring institution needs to make a choice of offering a one-year traditional type program or a two-year combination traditional and Advanced Functions offering. While the latter approach seems to be preferred nationally today, there are some problems of acceptance on the part of the students. Traditionally, dental hygienists have secured greater compensation levels than dental assistants. This has been justified for a number of reasons, one of which was the fact that a dental assistant spent less time in a less rigorous training program. With the advent of two year Dental Assisting Programs, this rationale becomes weakened. On this basis, some work would have to be done locally to raise salary ranges to levels equal to dental hygienists.

The question of whether a graduate from Luzerne's Dental Auxiliary Program(s) should practice Advanced Functions is a question the College needs to decide based on recommendations received from the Dental Auxiliary Advisory Committee. Many advisory committees across the country have engaged in much and sometimes heated debate on the subject. At one community college in Pennsylvania it has been resolved in favor of teaching Advanced Functions on the basis of the fact that the student should be trained to meet all employment contingencies. The decision to utilize a dental assistant in Advanced Functions is left to the employing dentist. If he chooses to have her provide these functions, she is trained to do it.

If he does not, she can still function in his office as a full and contributing participant of the dental team as it operates within that office.

C. **Expanded Duties for Dental Hygienists and Dental Assistants as Approved by the Pennsylvania State Dental Council and Examining Board** — The following functions may be performed by all dental auxiliaries. However, in the case of Dental Assistants all functions must be conducted under **direct** supervision.

- Exposing and processing dental radiographs
- Application and removal of rubber dam
- Primary impressions for study models
- Pumice prophylaxis of clinical crowns
- Placement and removal of dental matrix
- Placement and removal of temporary restorations
- Plaque control procedures
- Application of anti-carious and other topically applied agents
- Denture polishing and simple repairs
- Oral photography
- Placement, carving and polishing amalgam restorations
- Placement and finishing silicate, resin or composite restorations
- Adaptation, construction and placement of space maintainers
- Construction and fitting of mouthguard appliances

The following functions may be performed by a dental hygienist under the **general** supervision of a dentist:

- Radiographic interpretation for calculus deposits
- Preliminary diagnosis and treatment planning for dental hygiene services
- Dietary analysis and counseling
- Administration of diagnostic aids
- Plaque control program development and evaluation
- Deep scaling and curretage

The following functions may be performed by a dental hygienist only under the **direct** supervision of a dentist:

- Placement of pit and fissure sealants

Placement and removal of periodontal dressings
Removal of sutures
Administration of infiltration anaesthetics
Placement and finishing of amalgam, resin, composite, and silicate restorations
Placement and removal of temporary restorations

Recommendation — Results of the dental auxiliary labor market needs survey indicate that eighty-nine percent (89%) of the respondents would permit their auxiliaries to practice expanded duties under proper supervision, and that over sixty percent (60%) felt that job prospects were good to excellent for expanded duty trainees. It is recommended, therefore, that a dental auxiliary education program at Luzerne County Community College include appropriate levels of such training.

IV.

PROGRAM OBJECTIVES

Appropriate program objectives for Dental Hygiene and Dental Assisting are as follows:

A. **Dental Hygiene Program Objectives** — The Dental Hygiene Program should prepare the student to perform in a satisfactory manner the following functions:[5]

1. Utilize interpersonal relations in a variety of professional situations with an abilty to adapt to change.
2. Perform the various clinical skills within the scope of dental hygiene practice.
   a. Provide diagnostic aids including taking and recording medical and dental histories; making impressions for study casts; exposing radiographs; making occlusal registrations for mounting study casts; testing pulp vitality; recording vital signs; making and analyzing dietary surveys; and indexing dental and periodontal disease.
   b. Perform an oral inspection.
   c. Perform oral prophylaxis including removing supragingival and subgingival deposits and polishing restorations and removable prostheses.
   d. Assess the need for, plan, implement and evaluate oral health education programs for individual patients and community groups.
   e. Recognize and assist in management of medical and dental emergencies.
   f. Apply prescribed medications and anticariogenic agents.
   g. Remove excess restorative materials and polish restorations.
3. Effectively apply knowledge of dentistry as it pertains

to patient education and dental practice management.

4. Become sensitive to contemporary needs and responsive to professional obligations.
5. Develp an attitude conducive to continuing personal and professional growth.
6. Develop a social conscience to serve the needs of the community.
7. Assume a responsibility for oral health education by assessing the individual patient's needs, applying principles of disease prevention and planning, presenting and evaluating instruction.
8. Integrate knowledge of general studies, biomedical, dental and clinical sciences in providing the optimal preventive oral health service to the patient.

B. **Dental Assisting Program Objectives** — The Dental Assisting Program should prepare the student to function effectively as an integral member of the dental health team. To achieve this major objective, the program will:

1. Prepare the student to work and communicate effectively with patients, other auxiliaries, dental practitioners and other health professionals.
2. Provide background for dental sciences, dental assisting and clinical practice.
3. Provide the student with a basic understanding of materials used in intra-oral and laboratory procedures and their manipulation; also an understanding of form, structures of the oral cavity, oral health and disease and therapeutics as they relate to dental assisting procedures.
4. Provide a background in the objectives for and procedures of general dentistry and specialty practices,

principles of dental practice management, principles of chairside assisting and legal and ethical aspects of dentistry.

5. Provide specific content in principles which underlie dental assisting functions; and experience chairside assisting procedures, oral radiographic techniques, basic business office procedures, and laboratory procedures associated with chairside assisting which are usually performed in general dentistry practices and which are consistent with dental practice act provisions.[4]
   a. **Assist at chairside** in diagnostic, operative, surgical, periodontal, preventive, orthodontic, removable and fixed prosthodontic, endodontic, and pedodontic procedures which are a part of general dentistry, applying current concepts of chairside assisting.
   b. **Provide diagnostic aids,** including exposing radiographs, taking and recording medical and dental histories, recording vital signs, making preliminary impressions for study casts, and making occlusal registrations for mounting study casts, consistent with the dental practice act of Pennsylvania.
   c. **Perform clinical supportive functions,** including preparing and dismissing patient; sterilizing and disinfecting instruments and equipment; providing post-operative instruction prescribed by the dentist; preparing tray setups for general dentistry procedures; assisting in management of medical and dental emergencies; maintaining accurate patient treatment records; and maintaining the operatory, equipment and instruments.
   d. **Perform laboratory procedures** associated with chairside assisting including pouring, trimming, and polishing study casts; fabricating custom im-

pression trays from preliminary impressions; cleaning and polishing removable appliances; and fabricating temporary restorations.

e. **Provide oral hygiene instruction,** including conducting a plaque control program and speaking before school or community groups on the subject of oral hygiene.

f. **Perform basic business office procedures,** including maintaining appointment control, receiving and placing telephone calls, receiving payment for dental services and maintaining the supply inventory.

6. Provide an opportunity for students to learn advanced functions, including laboratory practice and clinical experience with patients to the extent needed to develop proficiency in performing all procedures and techniques.
   a. Performance of some of the clinical skills included in the oral prophylaxis, excluding scaling of the teeth with either hand or ultrasonic instruments.
   b. Application of medications and anticariogenic agents prescribed by the doctor.
   c. Performing other clinical skills to include oral inspection, the polishing of restorations, and removal of excess restorative materials.
   d. Application, condensation, contouring and polishing amalgam and tooth-colored restorative materials.
   e. Applying and removing temporary restorations.
   f. Application of rubber dam and selection, modification, placement and removal of matrices.
7. Utilize interpersonal relations in a variety of professional situations with an ability to adapt to change.
8. Become sensitive to contemporary needs and responsive to professional obligations.

9. Develop an attitude conducive to continuing personal and professional growth.
10. Develop a social conscience to serve the needs of the community.

V.

REQUIREMENTS FOR ORGANIZATION, ADMINISTRATION AND CURRICULAR CONTENT OF PROGRAM

A. Organization

The Dental Hygiene and/or Dental Assisting Programs require at least one year of planning prior to implementation. This time is necessary to: (1) employ faculty, (2) develop a curriculum suitable to the Council on Dental Education and to the college, (3) design a facility and install equipment, or effect a cooperative arrangement with an existing facility which would meet minimum space and equipment requirements.

B. Administration

1. The Dental Hygiene/Assisting director should be a hygienist/assistant with a Masters degree in Dental Hygiene education or a dentist with experience in Dental Hygiene/Assisting education.
2. There should be provision for direct communication between the director and the College administrator who is rsponsible for decisions that directly affect the program.
3. The director should be consulted when matters directly related to the Dental Hygiene/Assisting Programs are considered by the college.
4. Responsibilities of the director should include: budget preparation, fiscal administration, curriculum development and coordination, selection and recommendation of individuals for faculty appointments and promotions, participation in determining admissions criteria and procedures, planning and operation

of campus dental education facilities, selection of extramural facilities and coordination of instruction in the facilities.

5. In order to fulfill the above responsibilities the director should not carry a full-time teaching load, but it is appropriate for some teaching and/or clinical instruction to be carried out by the director.

6. The director should have a twelve-month contract or if on an academic year contract be paid for the time required to carry out necessary responsibilities during the summer months.

7. A licensed dentist must be available during all clinic sessions when patients are treated. The supervising dentist's appointment may be part-time and should be dependent upon the extent of his other commitments to the program. The responsibility of the supervising dentist may be shared by more than one individual. If the program administrator is a dentist, and acts as the supervising dentist, it is expected that additional faculty will be appointed to compensate for time spent in meeting this commitment.[7]

8. Admissions

   a. A set of admissions standards should be established that would result in minimum student attrition. These would include: graduation from an accredited secondary school (high school equivalency certificate acceptable), one year of high school biology, average to above average academic performance, high school or college laboratory sciences with C or better grades, ACT test scores, and Dental Hygiene Aptitude Test scores, with test score qualification levels to be established by the program director and staff.

b. Admissions Committee

An Admissions Committee should be appointed and include Dental Hygiene/Assisting faculty, basic and dental science faculty, and counseling staff members. Students should be interviewed by more than one member of this group.

c. Advanced Standing

Educational institutions are encouraged to consider admission of students with advanced standing through use of appropriate qualifying examinations. The level of performance required for credit by examination should meet established achievement standards. National standardized equivalency and proficiency tests should be utilized when they are applicable. Advanced standing policies for the dental hygiene program should reflect policies of the parent institution.[8]

C. **Curricular Content**

1. **General Studies:** English, speech, psychology, and sociology are necessary to prepare the students to communicate effectively with patients, other auxiliaries, dentists and other related health professionals. These courses should be transferable to other institutions of higher learning.

2. **Biomedical Sciences:** General anatomy, microscopic anatomy, physiology, biochemistry, microbiology, pathology, nutrition, and pharmacology are needed to provide background for dental and clinical sciences. Content in basic sciences which is essential to learning biomedical sciences should be included in or be prerequisite to the curriculum. If chemistry is a high school requirement, a one semester college chemistry course consisting of organic and biochemistry may be offered, otherwise, one year of college chem-

istry is necessary. This course should be transferable to other institutions of higher learning.

3. **Dental Sciences:** Tooth morphology, head, neck and oral anatomy, oral embryology and histology, oral physiology, oral pathology, oral therapeutics and dental materials.

4. **Clinical Sciences:** Periodontology, radiography, clinical dental hygiene and legal and ethical aspects of dental hygiene practice, dental health education, and community dental health.

The above includes all subject matter required by the Council on Dental Education as stated in its accreditation requirements.[9] Some of the material in the dental and biomedical areas can be offered within a single course rather than as separate courses. For example, if a college instructor in anatomy and physiology is not proficient in head and neck anatomy, the dental hygiene faculty can either prepare special units for the course or this material may be included in another course such as morphology or pathology, as long as sufficient time is allocated for it. Nutrition may be offered by a nutritionist or a hygienist and should include dental as well as general nutrition.

D. Sample Curriculums

Included as Appendices III and IV are program configurations for Dental Assisting and Dental Hygiene as they are presently offered in a dental education program in a Pennsylvania community college. The sample Dental Hygiene Program is fully accreditated by the Council on Dental Education, while the Dental Assisting Program is under provisional accreditation pending a site visit to be made in the Fall of 1974. These programs serve as guides to how curricular requirements of the Council on Dental Education have been transcribed into a workable program at one college. The recommended Dental Assisting Pro-

gram is one and one-half (1½) years and includes instruction in Expanded Duties. However, should a dental auxiliary education program(s) be initiated at Luzerne County Community College, the actual curriculum that would be offered would have to be developed by the College's dental education department and approved by the College's curriculum committee, President, and Board of Trustees.

E. Continuing Education

A major area of concentration for Luzerne County Community College will be Continuing Education for Dental Auxiliaries. While the Council on Dental Education does not address itself directly to Continuing Education, nor do they enclose program exhibits outlining offerings in this area, it is important to note that there will be many practicing assistants and hygienists in the greater Luzerne County area who are undertrained by virtue of having received an orientation to the auxiliary field by preceptor experience or as a result of having received formal training some years ago. An active Continuing Education Program in dental education will enable the College to provide for upgrading of skills and job retraining for dental auxiliaries in the greater Luzerne County area. The College, if it initiates a dental education program, should plan on working closely with the local Dental Assisting and Dental Hygiene Professional Association in developing a viable Continuing Education Program for the currently employed auxiliaries in the area. In addition, it will be important for the College to consider offering Continuing Education activities for dentists. Once facilities are available and the programs are ongoing, it will be possible for the College to make arrangements to have adjunct professors from Columbia University, the University of Pennsylvania, and Temple University come to the College to provide Continuing Education Programs for area dentists. The College should endeavor in its Public Information Program to let the den-

tal community know of the wide range of services that will be available for the dental profession through the College's involvement in this allied health area.

VI.
CLINICAL RESOURCES REQUIREMENTS

Two major clinical resources will need to be provided by the College. The first are physical clinical facilities, and the second are human resources, namely, patients.

A. Physical Clinical Facilities

The following are recommended physical clinical facilities for a combined Dental Hygiene/Dental Assisting Program. These facilities are based on an assumption that th programs will admit 24 students annually in each, and that 16-18 will be carried over as sophomores in the Dental Hygiene Program, bringing the total number of students served to approximately 65.

1. Dental Assisting Laboratory — 780 square feet
2. Dental Assisting Storage — 180 square feet
3. Locker Room Space — 380 square feet
4. Reception Waiting Area — 200 square feet
5. Three X-ray Rooms — 240 square feet (80 square feet each)
6. X-ray Developing Room — Dark Room — 140 square feet
7. X-ray Viewing Room — Patient Education — 150 square feet
8. Dental Hygiene Supply Room — 90 square feet
9. Clinic (16 chairs) — 1,850 square feet
10. Office Space — 200 square feet
11. Two fully Equipped Operatories for Expanded Duties — 300 square feet

This amount of square footage, 4500, is considered adequate for the type of program described. Should the College decide to offer only one program, Dental Assisting, the space requirements could be reduced by approximately one-half, depending upon the number of students to be admitted into the program.

If possible, administrative and faculty offices should be located as near to the clinic and laboratory area as possible. Also, it is important that a locker room be provided for students in order to permit them to change from street clothes to appropriate clinical attire. This is an important factor that is often overlooked by programs, but it is of considerable concern to the accrediting body.

In addition to the above facilities, it will also be necessary for the program to be supported by a general college science laboratory equipped with gas, electricity, and a number of sinks. This will permit instruction in such courses as Human Biology, Chemical Science, Dental Morphology, and Microbiology. The College has adequate laboratory facilities to support these instructional areas.

COOPERATIVE PROGRAM WITH EXISTING CLINICAL FACILITY

Another important consideration in determining facility and equipment requirements would be the establishment of a cooperative program with an existing clinical facility. For instance, the Veterans Administration Hospital in Wilkes-Barre has a seven-chair clinic, a dental technology laboratory, a radiographic operatory which includes a darkroom, and a caseload of 100-150 patients per day. The dental staff at the hospital includes six dentists, a hygienist, and five dental assistants of which two are Certified Dental Assistants. Because of the limited number of operatories presently available, a cooperative program with the Veterans Administration Hospital would support, depending on the hours available for use and the flexibility of scheduling such use, a smaller enrollment than that proposed at the beginning of this section. Whether or not such a program can be initiated depends, of course, on approval by the Veterans Administration and the College Board of Trustees.

Another possible cooperative program, to be mutually agreed to and utilizing an existing facility, would be one with the Rural Health Corporation of Luzerne County. Information regarding this facility and a letter of support from its administrator and its director are included as Appendix V. Included as Appendix VI is a copy of the dental hygiene facility requirements guidelines established by the Council on Dental Education of the American Dental Association.

It should be noted that if a cooperative program is established with an existing clinical facility, the facility could only be used for teaching purposes when it is not otherwise in use, which means that clinical instruction would have to occur in the evenings, with the remaining non-clinical courses to be conducted at the main College campus in Nanticoke. Also, the respective patient populations would have to be surveyed and categorized if they are to become a part of the program's human clinical resource. This surveying and categorizing would allow for recruitment of additional clinical patients, if necessary, to provide the program's student's with adequate exposure to the required range of dental care problem areas.

The Council on Dental Education "Requirements for Use of Extended Campus Facilities in Dental Hygiene Education" are included as Appendix VII. It is recommended that such guidelines be followed for a dental assisting program also.

B. **Patient Resources for the Program**

The total number and type of patients for whom each student performs services should be adequate for development of proficiency in all clinical procedures which are permitted by the Pennsylvania State Dental Council and Examining Board. Students should have experience in treating patients of all age ranges, with the majority of patients having advanced periodontal disease and requir-

ing application of the most difficult instrumentation techniques. The standard rule of thumb is 100 patient visits (75 adults and 25 children) in the two year Dental Hygiene Program and 300 hours of chairside assisting (a patient load is not specified) in the one-year Dental Assisting Program. This does not mean that 100 different people need to be recruited as clinical patients. One person might make a number of visits throughout a given academic year. Until a program has been in existence for a few years and has had the benefit of exposure and reputation in the community, patient visits do not achieve a very high level. Possible sources for clinical patients are as follows:

1. Family and relatives of students enrolled in the program
2. Senior citizens groups
3. Indigent population (in coordination with the department of public welfare)
4. Jails and prisons
5. Other colleges and universities located in the Wyoming Valley
6. Public and parochial schools which do not employ their own dental hygienists
7. Day care centers and nursery schools
8. Federally funded health care centers, such as Rural Health Corporation, Kirby Health Center and VA Hospital
9. Business and industrial clinics, such as ILGWU

VII.

FINANCIAL REQUIREMENTS AND SOURCES OF POSSIBLE OUTSIDE FUNDING

As has been stated earlier, dental auxiliary training is expensive. Earlier in this study, information was provided on the amount and cost of facilities to support the program. With respect to both operating and capital costs, the following figures and program options are offered based on the College's experience in budgeting for its technical-career programs.

Cooprative Program in Dental Assisting

If the College were to offer a program in cooperation with an existing facility, such as the Veterans Administration Hospital or the Rural Health Corporation, it is recommended that only a dental assisting program be offered and that the program admit a maximum of twenty-four (24) students annually.

The initial capital costs (furniture and equipment) would be approximately $20,000.00, and the initial per student operating cost would be $1900.00

The program would employ a part-time dentist(s) as executive director, two full-time faculty, and a secretary. The general education courses in the program would be taught by regular college staff.

The clinical courses would be taught at the facilities made available through the cooperating agency, with the balance of the courses being taught at the campus in Nanticoke.

The total first-year budget would be $65,000.00. A detailed listing of the budget requirements for this program option is included as Appendix VIII.

Combined Program in Dental Assisting/Dental Hygiene

If the College were to offer a program in dental hygiene, the extensive facility and equipment requirements (see Appendix VI) would have to be provided by the College as they are not otherwise available within the County. Because the facilities for a dental hygiene program could also be used for a dental assisting program, as is currently being done at Northampton County Area Community College, Luzerne should also use this combined program approach. Such an approach provides for maximum usage of facilities, better meets the dental health needs of the area, and generates more enrollment for the College.

The initial capital cost for construction would be approximately $180,000, and for equipment would be $252,000. These funds would be needed to build and equip an adequate clinical-teaching facility which would serve forty-eight (48) students during the first year, and approximately sixty-five (65) students in the second and each succeeding year, assuming a 25-30 per cent attrition rate from the first to the second year in the dental hygiene program.

The combined program would employ a full-time dentist as executive director, five full-time faculty and one part-time, and a secretary. It is estimated that the equivalent of one full-time faculty member in the general education area will be needed to meet the added program demand for these courses.

The per student operating cost for the combined program in the first year would be $1700, and $1728 in the second year. Thus, after the initial capital expenditures, the combined program would be less expensive, on a per student basis, than the dental assisting cooperative program. A detailed listing of the budget requirements for this program is included as Appendix IX.

Outside Funding Sources

There are a number of possible outside sources of funding available for the implementation, improvement, and expansion of dental hygiene and dental assistant education programs, for program research, for student scholarships, student long-term low interest loans, and for the construction of facilities. The following sources provide the **major** funding possibilities:

Program and Facilities Funding:

1. Vocational Education Amendments of 1968
2. Allied Health Manpower — Health Programs Extension Act
3. Pennsylvania Department of Public Welfare
4. The Veterans Administration
5. Higher Education Facilities Grants
6. Appalachian Regional Development Act
7. Strengthening Developing Institutions — Higher Education Act
8. Private Foundation Grants

Student Funding:

1. Basic Educational Opportunity Grants
2. Pennsylvania Higher Education Assistance Agency Grants
3. Pennsylvania Higher Education Assistance Agency Guaranteed Loans
4. College Work-Study Program
5. Federal and State Employment Training Acts

VIII.

STATE CERTIFYING AND LICENSING REQUIREMENTS

A. Dental Hygiene

In order to receive licensure, the Pennsylvania State Dental Council and Examining Board requires a 75% average on the National Board Dental Hygiene Examination which is taken in the Spring of the second year of the program or in the summer following graduation. This is an all-day multiple choice test and requires a fifty dollar registration fee. The Northeast Regional Board Examination is taken at about the time of program graduation. The Northeast Regional Board is a testing agency which is presently accepted in 13 states — Connecticut, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, Ohio, Pennsylvania, Rhode Island, Vermont, West Virginia and the District of Columbia. This examination consists of 50 slides and multiple choice questions and a clinical examination administered by a board member. The examination is held on the premises of the college where the student is trained. After the successful completion of these examinations and graduation from the institution, the student may apply for a license to practice dental hygiene in Pennsylvania, and the cost of this license is $25. However, before the certificate is issued, the student must apply for and receive a certificate of preliminary education which certifies that she has received a high school diploma or its equivalency. The cost of this certificate is $5.00.

B. Dental Assisting

Certification in Dental Assisting (CDA) is provided by the American Dental Assisting Association (ADAA). This represents a national professional association certification

and not a state license. Students register with the ADAA and take the test in the school where they were trained. They must be a graduate of an accredited Dental Assisting Program before they may sit for the examination. The cost to register for the test is $30.

IX.

REGIONAL AND NATIONAL ACCREDITING REQUIREMENTS

The American Dental Association's Council on Dental Education is the national accrediting body for all Dental Auxiliary Programs, including both Dental Hygiene and Dental Assisting. Prior to the acceptance of the first class, the school must submit an application for accreditation eligibility status. If this is approved, the college enters into correspondence status with the Council on Dental Education. Following this, a self-study is done by the institution in which it prepares a manual which explains in detail the curriculum, the facilities, admnistration, staffing and financial structure of the program. If the Council finds this self-study acceptable, provisional accreditation status is given. If not, the Council makes recommendations for necessary changes which must be made prior to the granting of the provisional accreditation.

During the second year of operation, the Council sends a site visit committee to the school to review all aspects of the program. This group interviews college administrators, Advisory Committee members, the program director, faculty, supporting general education faculty, science faculty, and students. Their report is reviewed by the Council, which meets twice yearly, in December and in May. If there are no deficiencies, full approval status is granted. If there are deficiencies, provisional or conditional status is continued. Progress reports must be submitted annually until full approval is granted. Programs with full approval are reviewed every seven years at which time new self-study reports are submitted and a site visit is made by members of the Council. In order for the Council to issue Dental Auxiliary accreditation for either Dental Assisting or Dental Hygiene, the college itself must have

received full accreditation status from its regional accrediting agency. In the case of Luzerne County Community College, this would be the Middle States Association. If Luzerne failed to secure accreditation from Middle States, the Council on Dental Education would refrain from accrediting its Dental Auxiliary Program(s) until that step is achieved. The Council's "General Policy" and "Educational Setting" statements, which directly relate to accreditation, are as follows:

Statement of General Policy

Maintaining and improving the quality of dental auxiliary education is a primary aim of the Council on Dental Education. In meeting its responsibilities as a specialized accrediting agency recognized by the dental profession, the National Commission on Accrediting and the United States Office of Education, the Council on Dental Education:

1. Evaluates dental hygiene programs on the basis of the extent to which program objectives, institutional objectives and approved accreditation requirements are met.
2. Supports continuing evaluation of and improvements in dental hygiene education programs through institutional self-evaluation.
3. Encourages innovations in program design based on sound education principles.
4. Provides consultation in initial and on-going program development.

As a specialized accrediting agency, the Council relies on an authorized institutional accrediting agency's evaluation of the objectives, policies, administration, financial and educational resources and total educational effort of the institution. The Council's evaluation of administration, financial operation, facilities, faculty, library and instructional resources, admissions policies and procedures, and achievement standards will be confined to those factors

which are directly related to the quality of the dental hygiene program.

Educational Setting

It is expected that a dental hygiene program will be established in a not-for-profit institution of higher education that is accredited by a regional accrediting agency recognized by the National Commission on Accrediting. If the institution has not attained full accreditation, it is expected that an application for such recognition is being processed and that there is reasonable assurance that that status will be forthcoming. Appropriate settings for dental hygiene education programs are institutions such as dental schools, four-year colleges and universities and comprehensive two-year colleges, which offer college level programs leading to an associate or higher degree and courses which are recognized for credit toward a baccalaureate degree; and which have appropriate fiscal, facility, faculty and curriculum resources.[10]

X.

REQUIREMENTS FOR AND AVAILABILITY OF QUALIFIED PROFESSIONAL STAFF

As previously mentioned, the director of both the Dental Hygiene and Dental Assisting Programs should ideally be either a dental hygienist/assistant with a Master's Degree, or dentist with experience in Dental Hygiene/Assisting Education. If individuals with such credentials cannot be found, then the College will have to secure the best qualified persons it can and seek to justify the individual's practical experience in lieu of the Master's credential. Dental Hygiene/Assisting faculty members should have Baccalaureate Degrees and some experience as practicing dental hygienists/assistants. The College will need to secure the best qualified people it can and again attempt to justify practical experience for academic credentials. At the present time, the labor market for qualified administrators and faculty members in Dental Hygiene and Dental Assisting is inverted. There are more colleges and universities seeking staff than there are staff available to fill positions. One contributing factor to this is that there are only six universities in the United States which offer a Master's Degree in Dental Hygiene. These include the University of Washington, the University of Michigan, the University of Iowa, Columbia University, the University of Missouri at Kansas City, and the University of Minnesota. A few additional universities offer the Baccalaureate Degree. However, these institutions have not been able to produce sufficient educators for the 157 Dental Auxiliary Programs currently operated in this country. The recruiting of qualified staff will be one of the most difficult tasks for Luzerne County Community College.

The following sources for locating qualified faculty are recommended:

a. Establish communications with the respective Dental Auxiliary Departments of the schools mentioned above.

b. American Dental Hygienists and Assistants Association Registry — all available hygienists and assistants usually register with this service. The division of Educational Services will send names of possible candidates to the college for review.

c. The American Dental Hygienists Association Journal — positions available may be advertised in this professional journal.

d. The local Dental Assistant and Dental Hygiene Association — will provide additional information on how qualified staff might be provided.

e. Dental Auxiliary Advisory Committee — should be able to identify outstanding auxiliary practitioners from the greater Luzerne County area. These practitioners, by virtue of their experience, may be qualified to fill the college's staffing needs.

XI.

CAREER OPPORTUNITIES AND RECRUITMENT OF STUDENTS FOR PROGRAM

The recruiting of students to be enrolled in dental education programs does not usually present a problem. Dental Hygiene and Dental Assisting are "high interest" programs, and in all likelihood the College will have more students apply than can be served. The following are recommendations on how the availability of Dental Auxiliary Programs at Luzerne County Community College can be brought to the attention of the community.

a. News stories and advertisements in local newspapers.

b. Liaison with public and parochial secondary schools in the Luzerne County region. High school counselors should be sent literature or invited to an information program at the College where they will be provided with data on the Dental Auxiliary Program(s). One of the major problems for high school counselors is a thorough understanding of the difference between Dental Hygiene and Dental Assisting. Students should receive accurate information on the differences in training requirements for the two programs. The College will have to make certain that the counselors are fully informed about the differences between the purposes and objectives of each program so students can select correct alternatives.

c. Liaison with local Dental Assisting and Dental Hygienist Associations. These groups have local publications or newsletters in which information about the program can be placed and disseminated to those on their mailing lists.

d. Bureau of Employment Security. This agency should

be apprised of the existence of the Dental Hygiene and/or Dental Assisting Programs at the College and invited to recommend qualified candidates for enrollment in the program.

e. The local Dental Societies should be fully informed of the program and prepared to disseminate information to patients and other contacts especially as regards the scholarships offered by the Auxiliary (wives) of each dental society.

XII.

AREA NEED FOR DENTAL AUXILIARIES – RESULTS OF LABOR MARKET SURVEY

Luzerne County

In late April, 1974, a survey (see Appendix I) of all Luzerne County dentists was conducted to determine the need for dental assistants and/or dental hygienists. Of the 170 surveys mailed out, 80 were returned (47%).

Dental Assistant — Of the surveys that were returned, 77 per cent indicated that they currently employ approximately 157 dental assistants and have an immediate need for an additional 50 assistants, with a need for approximately 105 more forecast for the next three years. The same 77 per cent also indicated that they would prefer to employ a college-trained assistant rather than train one themselves.

The turnover rate for dental assistants, over the past five years, is approximately 44 per cent, according to 76 per cent of the respondents. Eighty per cent of the respondents indicated they would permit their dental assistants to perform expanded duties under their, the dentists', supervision. Job prospects for a traditional trainee were rated "good to excellent" by 70 per cent of the respondents, while 63 per cent listed "good to excellent" job prospects for the expanded duty trainee.

Dental Hygienist — Approximately 20 dental hygienists are employed by 26 per cent of the respondents. If a trained supply of hygienists were available, there is an immediate need for 37 in Luzerne County, with an additional 50 needed over the next five years.

The turnover rate for hygienists, over the past five years, is 54%, with 48 per cent of the dentists providing

responses on number of hygienists leaving their employ, but only 31 per cent responding about the number of hygienists that they have employed.

As regards expanded duties for hygienists, 70 per cent replied that they would permit such duties under their supervision. Job prospects for both traditional and expanded duty trainees were rated "good to excellent" by 61-63 per cent of the respondents, with the slightly higher percentage being indicated for the expanded duty trainee.

Program Involvement and Continuing Education

In answer to the question "Would you be willing to teach/lecture or provide clinical supervision, with compensation, in a training program at Luzerne County Community College at times convenient to you," 66 per cent replied affirmatively. Such involvement was also indicated for allowing students to visit dental offices, with about one-half of the responding dentists limiting the visits to an observational experience only, and the other half allowing qualified trainees to participate as externs.

In the area of continuing education, 90 per cent are in favor of their auxiliaries attending such courses at the college, and 68 per cent indicated they would give their auxiliaries paid time off to attend, while 58 per cent indicated they would help meet the tuition costs for such programs. Approximately 91 per cent would attend special courses for dentists, 81 per cent would bring their auxiliaries with them, and 71 per cent would attend lectures/demonstrations on expanded duties.

Summary — It would appear that there is significant need and support for a dental assistant training program offered by Luzerne County Community College. As regards dental hygienists, the reported need is not as great. However, with exposure to continuing education programs regarding how to properly use the services of a hygienist, plus the in-migration to the area of younger dentists already trained in such use, the demand should continue to

rise. A review of the dentist's comments that were included with the surveys, see Appendix X, indicates a stronger interest in dental hygiene than the figures show. Also, because hygienists can only be trained in a formal educational program, such a program is a necessity if there is to be any significant chance for area dentists to upgrade and expand their practices through the use of such auxiliaries.

Scranton District Dental Society

While the labor market needs survey was being conducted in Luzerne County, the same survey form was sent to members of the Scranton District Dental Society. Of the 175 surveys mailed, 54 were returned (31%). Although the area represented by the membership of the Scranton District is not a part of the College's sponsoring area, Luzerne County, it was felt that a regional labor market appraisal was necessary because of the mobility of the graduates of a community college program and because most of the Scranton District is within commuting distance of the College's Nanticoke campus.

Of the 54 surveys returned, 44 or 81 percent, indicated they employ a dental assistant and 13 (24%) employ a dental hygienist. Sixty-three percent of the respondents would prefer to employ a trained assistant rather than train their own, and the immediate need for assistants was indicated as 22, with 29 more needed over the next three years. Eighteen hygienists are needed now, with 17 more over the next five years.

Summary — Although the response of the Scranton District dentists was not large enough to use for any statistically valid projections, it does supplement the Luzerne County responses in that it evidences a strong need for dental assistants, a need for dental hygienists, and an interest in having an area educational institution provide a trained supply of such dental auxiliaries.

XIII.

EXISTING DENTAL AUXILIARY TRAINING PROGRAMS IN LUZERNE COUNTY AREA

At present there are no dental auxiliary training programs in the greater Luzerne County area, or even in Northeastern Pennsylvania. The closest programs are at Broome Community College, Binghamton, New York and at Northampton County Area Community College, Bethlehem, Pennsylvania. These programs serve the needs of their sponsoring areas and only incidentally help meet the dental auxiliary needs of Luzerne County.

Contacts with four-year, two-year, and vocational-technical school officials in Luzerne County indicate that none offer or plan to offer dental assistant and/or dental hygienist training programs. This means that were Luzerne County Community College to offer such programs, it would not be duplicating any existing programs.

XIV.

SPECIAL FACILITIES AND RESOURCES NEEDED FOR PROGRAM

The facilities required for the Dental Auxiliary programs proposed for Luzerne County Community College have been described elsewhere in this study. However, additional resources are needed that have not been described elsewhere. For example, the program will be strengthened if students get an opportunity to visit local dental offices for the purpose of practicing some of their skills in a dental office environment. The results of the survey indicate that there should be sufficient offices for this purpose. However, if there is a problem in this area, it can be partially alleviated by members of the Dental Auxiliary Advisory Committee acquainting their peers with the importance of cooperating with Luzerne County Community College in training its auxiliaries.

It will be important for the College to rotate its students through general offices as well as the specialty offices so students will get varied experiences. This should not cost the College any additional money, since it has been the practice of the local dentists in many areas to cooperate by opening their offices and permitting students to function there in this way. The program faculty and administrative staff should make a list of the office experiences they wish their students to have. This list should be submitted to and approved by the respective dental offices before students receive assignments. If a dentist feels that a student cannot secure such experiences in his office, then the student should not be assigned.

Learning Resources

According to the American Dental Association Council on Dental Education, the institution's library holdings

should include a diversified collection of current reference books on dentistry, dental assisting, and back issues of major scientific journals related to dentistry available for student and faculty reference.

Adequate audio-visual materials and equipment, including resources for clinical photography, should be available, and the dental program should have access to these on the same basis as other programs.

Budget provisions should be made for regular acquisition of current editions and new titles of books and for annual subscriptions to periodicals. As appropriate autotutorial materials become available, they should be provided for students' use.

The American Dental Hygienists' Association "Suggested Library List For Dental Hygiene Education Programs" contains fourteen (14) pages of suggested acquisitions. The College Library could, initially, provide fifty (50) per cent of these at a cost of approximately twelve hundred dollars ($1200.00), and the College's Programmed Study Center has an extensive array of autotutorial learning equipment and materials. In addition, the center has facilities for development and duplication of staff-prepared audio-visual programmed learning packages, and the College Library houses an adequate inventory of audio-visual equipment for classroom use.

The College's learning resource facilities, with the exception of acquiring the needed subject-matter books and periodicals, are quite sufficient to meet the requirements of a dental education program.

XV.

PERTINENT OBSERVATIONS REGARDING AN EXISTING DENTAL AUXILIARY EDUCATION PROGRAM

A. Staffing

Northampton County Area Community College's Dental Auxiliary program employs six full-time Dental Auxiliary staff members and enrolls approximately 70 students. In addition, there are regular college faculty who teach general education and science courses, and some dentists who are paid on an hourly basis are invited to give lectures in certain skill courses. There is an executive director for both programs who is a dentist. In addition, there is a director of Dental Hygiene and a director of Dental Assisting (job descriptions included as Appendix XI). There are two full-time clinical instructors in Dental Hygiene and one full-time instructor in Dental Assisting. It is recommended that Luzerne attempt to secure one director of both auxiliary programs, rather than having a director for each. As has been mentioned earlier, the successful recruiting of such individuals is difficult. Salaries offered by the college need to be competitive with salaries which could be secured in other teaching institutions or by working in the profession itself.

With respect to the employment of the executive director, a different set of problems is presented. The state requires that a dentist be available at all times when the clinic is in operation. The dentist is there in order to respond to any emergencies that might develop. Such emergencies could include the scraping out of an amalgam, the dislodging of a bridge, incorrect administering of anesthesia, a fainting spell, or a cardiac arrest. It is usually difficult to secure the services of a dentist on a continuing

basis. Northampton has had three executives in five years. A successful local dentist is not interested in applying, since he can earn more money in his practice than he can at the college. Often times young dentists are interested in associating with the college until such time as they can build their own local practice, then they tend to leave. A senior dentist sometimes is not fully acquainted with the new Advanced Functions, and may not have worked on a team basis with auxiliaries or assistants in his office. He would be poorly equipped to direct such a modern program of instruction.

It is possible to have a number of dentists provide service at the college, but this presents problems of continuity which can severly weaken the program. Northampton has adopted the practice of employing an executive director four days a week, which permits a dentist to spend some time in his own practice. In addition, the college only has use for his services 180 days per year. He can then operate his practice the rest of the year.

A salary range of $18,500 to $25,000 has been established for the executive director of the program and, effective in the 1974-75 academic year, the director's salary will be about $22,500. This will include one evening clinic which will be added to the program next year. In that some patients cannot come to the college during the day, the presence of an evening clinic will stimulate more clinical patients.

Northampton also invites dentists to come to the college to give lectures in certain areas where they hold expertise. These lectures are given only in the specialty skill courses. The dentists are invited by the executive director of the program after consultation with the faculty and director and are paid an hourly rate during the term of each lecture.

B. Intramural Practice

An interesting innovation that Luzerne County Community College might consider is an Intramural Practice. Northampton County Area Community College implemented such a practice in the Fall of 1973. An Intramural Practice provides that the executive director of the Dental Auxiliary programs practice general operative dentistry on the college premises and is of common occurrence in dental schools. In order for dentists in training to secure proper career preparation, it is necessary for licensed dentists to practice dentistry on college campuses so the students might observe and then begin to participate in such practices. Northampton's Intramural Practice is modeled after that of the University of North Carolina.

According to rulings received from the State Department of Education and the Attorney General's office, the Intramural Practice is a function of the college. The dentist does not work for himself but works for the college and is permitted to spend 8 - 12 hours a week on the Intramural Practice. He develops a patient roster from individuals who attend the clinic to undergo an examination. If dental work is needed, the patient is referred to his dentist. If the patient reports that he does not have a dentist, he is informed of the services of the college dentist and referred to him. The college dentist then provides the individual with necessary dental services, and each patient is billed in accordance with the existing local dental society fee schedule, and the fees go to the college rather than to the dentist. In order for such an arrangement to be approved by the Attorney General, it is necessary for the dentist to work for the college. All receipts from the Intramural Practice belong to the college. This arrangemen permits the college to pay the dentist a higher salary than it normally could afford. He is, in effect, earning some of his salary through the conduct of the Intramural Prac-

tice, since the amount raised in the Intramural Practice is used to defray the Executive Director's salary.

The Intramural Practice at Northampton has been very successful. It developed slowly last year but has grown to a point where the full twelve hours a week is being utilized by the dentist in the Intramural Practice. In order to support the Intramural Practice, it is necessary for the college to have one fully equipped operatory. The remaining facilities in the Dental Auxiliary Clinic are ample support facilities to operate a good Intramural Practice.

C. Transportation

As has been stated earlier, one of the major problems of the program will be to secure sufficient clinical patients. When patients are secured, in many cases problems of transportation will be presented. Individuals will state their willingness to come to the college's clinic but will report that they lack transportation to the college. Northampton, when faced by his problem, was successful in uncovering a source of funds which aided in the solution. The college received a grant from the March on Dental Disease, Kent, Ohio, to purchase a fifteen passenger van for the purpose of transporting individuals to and from the clinic who lacked adequate transportation. There is no reason to believe that Luzerne County Community College could not qualify for such a grant and secure a van to support transportation requirements.

D. Continuing Liaison With Local Dental Societies

It is imperative that the college establish at the outset, and continue to develop on an ongoing basis, close relationships with the local dental societies. Northampton has attempted to effect that relationship by assigning the responsibility of liaison to the executive director of the Dental Auxiliary programs. He is instructed to attend each

meeting of the local dental societies, and these societies have made it a practice of having an item on their agenda where the executive director is permitted to give a report on the college's programs. In addition, the college has appointed a member of its Advisory Committee to support the liaison of the executive director with the dental society. This Advisory Committee member is elected because he is the kind of individual who normally attends society meetings and may even be an officer of the society. He gives reports on the program from the Advisory Committee's perspective and sometimes fills in for the executive director in the event he is unavailable on a given evening.

E. **Clinical Charges**

It is customary at Northampton to make basic charges to patients utilizing the clinic. Such charges cover the cost of the disposable bib, fluoride treatment, toothbrush, and film for any X-rays that may be taken. The college's charges at this time are as follows:

1. Community member — $2.00 per visit
2. College students — $1.00 per visit
3. All X-ray service — $ .50 per visit (This charge is in addition to the above figures.)
4. Indigent population — fees waived

During the 1972-73 academic year, the college received an income of $669 on the operation of its clinic.

F. **Budget**

Following are the actual 1973-74 budgets for both Dental Assisting and Dental Hygiene at Northampton County Area Community College. These budgets do **not** include the salary of the executive director.

1. **Dental Hygiene**

   Administrative, full-time — $12,422
   Classified, secretary, full-time — $5,432

Instructional, full-time — $31,825
Instructional, part-time, Fall — $1,500
Instructional, part-time, Spring — $1,724
General Materials and Supplies — $200
Instructional Materials and Supplies — $3,778
Printing — $35
Travel — $220
Equipment Repairs and Maintenance — $378
Honorariums — $1,928
TOTAL BUDGET FOR DENTAL HYGIENE — $59,242

2. **Dental Assisting**

Instructional, full-time — $11,025
Student Wages — $1,024
Instructional, part-time, Fall — $3,125
Instructional, part-time, Spring — $2,025
General Materials and Supplies — $200
Instructional Materials and Supplies — $3,732
Travel — $200
TOTAL DENTAL ASSISTING — $21,331

TOTAL — BOTH PROGRAMS — $80,573

G. Insurance

It is essential that the college provide liability insurance for the college itself and for the students enrolled in the program. Northampton carries dual coverage on its Dental Auxiliary programs. The primary coverage provides malpractice and liability insurance for all students enrolled in the program. It also covers the college and the college faculty, both while the students and faculty are practicing on college-owned property and while they are in doctor's offices securing experience as described earlier. The total cost of the policy at Northampton is $1,700. Northampton also carries secondary blanket coverage under a general liability policy.

XVI.

REFERENCE NOTES

1. **Guidelines** (Harrisburg: Pa. Dept. of Education), p. 16.
2. Luzerne County Community College, **Curriculum Feasibility Study** (Wilkes-Barre, 1970), pp. 21-30.
3. "Requirements For An Accredited Dental Hygiene Education Program" (approved by House of Delegates, November, 1973), pp. 2, 3.
4. "Requirements For An Accredited Dental Assisting Education Program" (approved by House of Delegates, November, 1973), pp 13, 14.
5. "Requirements . . . Dental Hygiene . . .," pp. 9, 10.
6. "Requirements . . . Dental Assisting . . .," pp. 9, 10.
7. Dental Hygiene, p. 7.
8. Ibid., p. 15.
9. Ibid., pp. 8, 9.
10. Ibid, p. 3.

XVII.

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"Guidelines for the Establishment of Public Community Colleges in Pennsylvania." Harrisburg: Department of Education, 1965.

Luzerne County Community College. **Curriculum Feasibility Study.** Wilkes-Barre: Luzerne County Community College, 1970.

"Requirements For An Accredited Dental Assisting Education Program." Chicago: American Dental Association, 1973.

"Requirements For An Accredited Dental Hygiene Education Program." Chicago: American Dental Association, 1973.

APPENDICES

APPENDIX I

LUZERNE COUNTY COMMUNITY COLLEGE
STUDY TO DETERMINE LABOR MARKET NEEDS FOR DENTAL AUXILIARIES IN THE LUZERNE-LACKAWANNA AREA

PART I — GENERAL DATA

1. CLASSIFICATION (circle appropriate title and complete sub-data.

   Dentist

   Group Practice _____ Single _____

   If Specialist,

   please indicate Specialty _____

   School Official

   Elementary _____ Secondary _____

   Vocational-Technical _____ Post Secondary _____

   Head of Governmental Agency

   Name Agency _____

   Administrator of a Health Care Facility

   Hospital _____

   Nursing Home: Public _____ Private _____

2. Number of years practicing in the profession _____
3. Number of operatories available in your office, agency, or institution _____
4. Check County in which practice is conducted:

   Luzerne _____ Lackawanna _____

   If other, please list _____

THANK YOU

Please go on to Part II

PART II — DENTAL ASSISTANT

1. Do you now employ a dental assistant?

   Yes _____ No _____

   If yes, how many? _____

   How many are CDA's? _____

   Average number of hours worked per week. _____

   How many non-CDA's? _____

2. How were your assistants trained?

   By you in your office (preceptor) _____

   School or College _____

   Name of Institution _____

3. If available and you had an opening, would you prefer to employ an assistant trained at an institution of higher education rather than train one yourself?

   Yes _____ No _____

4. How many assistants would you employ if a trained supply were available?

   Immediately _____ Within a three year period _____

5. Employment history.

   How many dental assistants have you employed in the past five years? _____

   How many dental assistants have left your employ in the past five years for any reason? _____

6. Do you prefer your dental assistant to be within a particular age range?

   Yes _____ No _____

   If yes, check range: 18-30 ____; 31-40 ____; over 40 ____

7. The state board of dental examiners has ruled that dental assistants may perform "expanded duties" under (direct) supervision of the dentist. A list of approved expanded duties and definitions is attached (see pages 11 and 12).
   Would you permit your dental assistant to perform expanded duties under your supervision?

   Yes _____ No _____

8. If you were to employ a trained dental assistant at this time, rank in order of your preference the duties you would consider most important for her to competently perform in your office. (rank 1, 2, 3, etc.)

   a. Laboratory procedures _____
   b. Chairside assisting — traditional _____
   c. Office management _____
   d. Chairside assisting — 4 handed _____
   e. Radiographic procedures _____
   f. Chairside assisting — expanded duties _____
   g. Patient education _____
   h. Typing _____

9. Considering all other sources of education and training, what is your estimate of employment possibilities for a dental assistant in the Luzerne-Lackawanna area?

	Traditional Trainee	Expanded Duty Trainee
Excellent	_____	_____
Good	_____	_____
Fair	_____	_____
Poor	_____	_____

10. How much can a graduate assistant expect to earn a week?

    Starting wage $_____ After 6 months $_____

    After 1 year $_____

11. Would you be willing to teach /lecture or provide clinical supervision, with compensation, in a training program offered at Luzerne County Community College at times convenient to you?

    Yes _____ No _____

12. Would you be willing to have a small number of qualified trainees in your office on a weekly basis?

    Yes _____ No _____

    If yes, indicate your preference about the following:

    Student on observational experience only _____

    Student on extern basis (actual participation) _____

    No. of students that could be served at one time _____

THANK YOU

Please go on to Part III

PART III — DENTAL HYGIENIST

1. Do you now employ a dental hygienist?

   Yes _____ No _____

   If yes, how many? _____

   Average number of hours worked per week? _____

2. How was your hygienist trained? (If you employ more than one hygienist, please use separate sheet of paper to provide the following information on each.)

   Name of institution _____

   Year graduated _____; Degree held _____

   Major field of study _____

   Would she be willing to teach at the college, with compensation, in an area for which she is qualified?

   Yes _____ No _____

   List area _____

3. How many hygienists would you employ if a trained supply were available?

   Immediately _____ Within a five year period _____

4. Employment history.

   How many dental hygienists have you employed in the past five years? _____

   How many dental hygienists have left your employ in the past five years for any reason? _____

5. Do you prefer your dental hygienist to be within a particular age range?

   Yes _____ No _____

   If yes, check range: 18-30 ____; 31-40 ____; over 40 ____

6. The state board of dental examiners has ruled that dental hygienists may perform "expanded duties" under (direct and general) supervision of the dentist. A list of approved expanded duties and definitions is attached (see pages 11 and 13).
   Would you permit your dental hygienist to perform expanded duties under your supervision?

   Yes _____ No _____

7. If you were to employ a trained dental hygienist at this time, rank in order of your preference the duties you would consider most important for her to competently perform in your office. (rank 1, 2, 3, etc.)

   a. Laboratory procedures _____
   b. Dental and periodontal charting _____
   c. Prophylaxis treatment _____
   d. Radiographic procedures _____
   e. Expanded duties _____
   f. Patient education _____
   g. Infiltration anesthesia _____

8. Considering all other sources of education and training, what is your estimate of employment possibilities for hygienists in the Luzerne-Lackawanna area?

	Traditional Trainee	Expanded Duty Trainee
Excellent	_____	_____
Good	_____	_____
Fair	_____	_____
Poor	_____	_____

9. How much can a graduate hygienist expect to earn a week?

   Starting wage $_____ After 6 months $_____

   After 1 year $_____

10. Would you be willing to teach/lecture or provide clinical supervision, with compensation, in a training program at Luzerne County Community College at times convenient to you?

    Yes _____ No _____

11. Would you be willing to have a small number of qualified trainees in your office on a weekly basis?

    Yes _____ No _____

    If yes, indicate your preferences about the following:

    Student on observational experience only _____

    Student on extern basis (actual participation) _____

    No. of students that could be served at one time _____

THANK YOU

Please go on to Part IV

PART IV — CONTINUING EDUCATION FOR AUXILIARIES AND DENTISTS

1. Would you be willing to give your hygienist/assistant time off for formal continuing education at the Luzerne County Community College?

   Yes _____ No _____

2. If continuing education courses were offered by the college or by other institutions/organizations at the college, would you encourage your auxiliaries to attend?

   Yes _____ No _____

   If yes, how much time would be acceptable?

   ½ day per month _____

   1 day per month _____

   Other than above (please indicate) _____

3. Would you pay any of your auxiliaries' expenses to attend continuing education courses at the college? (Tuition for courses is estimated at $22.00 per semester-hour of instruction.)

   Yes _____ No _____

   If yes, indicate amount of support:

   All of tuition _____

   ½ of tuition _____

   None _____

   Other _____

4. Would you continue to pay the salary of your auxiliary during the time she was away from the office?

   Yes _____ No _____

5. Would you prefer if continuing courses were scheduled in the evening or on your day off?

   Yes _____ No _____

   List day off _____

6. Would you pay the tuition for your auxiliary for courses offered in the evening or on your day off?

   Yes _____ No _____

7. Would you be interested in attending continuing education courses for dentists if Luzerne County Community College made arrangements for adjunct faculty from Columbia, Temple and Penn to teach at the college?

Yes _____ No _____

If yes, would you

Bring your auxiliary with you Yes ____ No ____

Attend lectures/demonstrations on expanded duties Yes ____ No ____

THANK YOU

Please go on to Part V

••••••••••••••

PART V — GENERAL COMMENTS

Please offer comment on your reaction to Luzerne County Community College offering programs to train dental auxiliaries.

Please place the survey in the enclosed self addressed stamped envelope and mail back to the college. It is not necessary that you identify yourself. Your assistance is greatly appreciated.

Definitions of Auxiliaries

I. Dental Assistant

A. Traditional — performs the functions of a receptionist, bookkeeper, seats the patient, cleans operatories, assists the dentist at chairside when necessary.

B. Four-Handed — works at the chair with the dentist all the time, passing instruments, utilizing special techniques, and preparing materials for the dentist to place in the mouth.

C. Expanded Duty — performs additional functions in accordance with attached list.

II. Dental Hygienist

A. Traditional — performs oral inspection, complete scaling and polishing procedures, fluoride treatment, exposes and processes radiographs, patient education under general supervision.

B. Expanded Duty — performs functions in accordance with attached list.

Dental Assistants

Expanded Duties

Expanded functions of dental assistants as reported in **Expanded Duties of Dental Auxiliaries** by Leon Penzur, Pennsylvania Dental Journal, 41: 14-15, January, 1974.

The following functions may be performed by **all** auxiliaries. However, in the case of dental assistants all functions must be conducted under **direct** supervision.

1. Exposing and processing dental radiographs
2. Application and removal of rubber dam
3. Primary impressions for study models
4. Pumice prophylaxis of clinical crowns
5. Placement and removal of dental matrix
6. Placement and removal of temporary restorations
7. Plaque control procedures
8. Application of anti-carious and other topically applied agents
9. Denture polishing and simple repairs
10. Oral photography
11. Placement, carving and polishing amalgam restorations
12. Placement and finishing silicate, resin or composite restorations
13. Adaptation and placement of space maintainers
14. Construction and placement of space maintainers
15. Construction and fitting mouthguard appliances

Dental Hygienists

Expanded Duties

EXPANDED FUNCTIONS OF DENTAL HYGIENISTS
AS APPROVED BY THE PENNSYLVANIA STATE
DENTAL COUNCIL AND EXAMINING BOARD
MARCH 19, 1973

General Supervision

Radiographic interpretation for calculus deposits
Preliminary diagnosis and treatment planning for dental hygiene services
Dietary analysis and counseling
Administration of diagnostic aids
Plaque control program development and evaluation
Deep scaling and curretage

Direct Supervision

Placement of pit and fissure sealants
Placement and removal of periodontal dressings
Removal of sutures
Administration of infiltration anaesthetics
Placement and finishing of amalgam, resin, composite, and silicate restorations
Placement and removal of temporary restorations

APPENDIX II

FUNCTIONS OF THE DENTAL AUXILIARY ADVISORY COMMITTEE

The Dental Auxiliary Advisory Committee is organized to assist and advise the Community College as it develops its Dental Assisting and/or Dental Hygiene Program offerings. Through this Advisory Committee the college will keep attuned to the educational and manpower needs of the local dental community. Its purpose is to:

1. Assist in identifying the continuing need for a Dental Assisting and Dental Hygiene Programs in the Community College.
2. Aid in the development of needed Dental Assisting and Dental Hygiene Programs.
3. Review topical course outlines regarding content of specific Dental Assisting and Dental Hygiene Courses.
4. Assist in the recruitment of students for Dental Assisting and Dental Hygiene Programs developed in the Community College.
5. Promote and maintain functional relationships with the dental community and with agencies affecting the placement of graduates.
6. Recommend and promote special courses and seminars designed to upgrade personnel currently employed.
7. Provide assistance in planning classrooms, clinics, laboratories, and specifying equipment necessary to provide adequate training to Dental Assisting and Dental Hygiene students.
8. Assist in securing instructional staff, obtaining educational materials of a specialized nature, and generating donations of equipment and supplies needed in the instructional program.

APPENDIX III

DENTAL ASSISTING CURRICULUM

Summer Session

Course	Credit
English I	3
Typewriting I*	3
General Psychology or Psychology of Human Relations	3
General Biology*	4
	13

First Semester

Dental Morphology	3
Pharmacology & Emergencies	3
Bacteriology, Sterilization & Transmission of Disease	2
Dental Assisting Materials	4
Chairside Assisting	4
Expanded Duty Training I	3
	19

Second Semester

Oral Radiology	3
Dental Specialties	3
Histology & Pathology	2
Practice Management	1
Dental Health Education	1
Expanded Duty Training II	3
Nutrition	3
	16

* General Biology will be required only if the student has not completed high school biology. The typing requirement may be satisfied by successful completion of a typing challenge examination.

DENTAL ASSISTING COURSE DESCRIPTIONS

Dental Health Education **1 Sem. Hr.**

Patient education, how to discuss dental health, preventive dentistry and home care with patients, the outlining of dental health programs and speeches to groups, and the location and use of source material.

Bacteriology, Sterilization and Transmission of Disease **1 Lect., 3 Lab., 2 Sem. Hrs.**

Communicable disease, transmission of disease, infection and its control, effective instrument sterilization, storage of instruments and other materials in a sterilized state, and the materials and equipment used to eliminate disease transmission.

Dental Assisting Materials **2 Lect., 6 Lab., 4 Sem. Hrs.**

The physical properties of materials, use of prepared teeth and models, the manipulation and use of plaster, stone, impression materials, restorative materials, investments, waxes and die materials, etc.

Chairside Assisting **1 Lect., 9 Lab., 4 Sem. Hrs.**

Chairside procedures including the proper seating of the patient, operator and assistant; logical steps of treatment procedures, tray setups, methods of clearing the operating field, post-operative care and procedures, four-handed dentistry, the identification, care and use of all equipment and instruments (rotary and others).

Expanded Duty Training I **1 Lect., 6 Lab., 3 Sem. Hrs.**

Dental materials, restorative materials, matrices, impression techniques, retraction, handpiece operation, polishing and plugging techniques, as well as instrumentation for all restorative work.

Histology and Pathology **2 Sem. Hrs.**

Examination of normal and abnormal cells and tissues as a background for the study of diseases that affect the human organism.

Practice Management **1 Sem. Hr.**

General office routine and management, maintenance of records and inventory, identification of instruments and office equipment, dental history, ethics and law.

Dental Specialties **1 Lect., 6 Lab., 3 Sem. Hrs.**

The appropriate terminology used in the specialty areas of dental service, the role of the dental assistant, and the materials and instruments used.

Expanded Duty Training II **9 Lab., 3 Sem. Hrs.**

Clinical application of skills, with patients in cooperation with licensed dentists, assisting with electrosurgery, hydrocolloid techniques, rubber dam variations, patient first aid measures and nitrous oxide assisting.

Nutrition **3 Sem. Hrs.**

Basic nutrition with emphasis on oral health. Dental Hygiene and Dental Assisting students only.

APPENDIX IV

DENTAL HYGIENE CURRICULUM

First Semester

Course	Credit
Human Biology	4
Bio-Medical Chemistry	3
Dental Morphology	3
Introduction to Dental Hygiene	4
English I	3
General and Oral Histology	2
	19

Second Semester

Microbiology	4
Dental Hygiene I	1
Clinical Dental Hygiene I	2
General and Oral Pathology	2
Oral Radiology	3
Nutrition	3
English II	3
	18

Third Semester

Clinical Dental Hygiene II	4
Periodontics	2
Dental Hygiene II	1
Pharmacology and Emergencies	3
Dental Materials	2
General Psychology or Psychology of Human Relations	3
	15

Fourth Semester

Dental Practice Orientation	2
Dental Health Education	2
Dental Speci lties	3
Clinical Dental Hygiene III	4
Introduction to Sociology	3
Humanities Elective	3
	17

DENTAL HYGIENE COURSE DESCRIPTIONS

Introduction to Dental Hygiene **2 Lect., 6 Lab., 4 Sem. Hrs.**

Techniques of primary preventive measures. Use and care of dental equipment.

Dental Morphology **2 Lect., 3 Lab., 3 Sem. Hrs.**

Anatomy of the head and neck. Form and structure of decidious and permanent teeth.

General & Oral Histology **2 Sem. Hrs.**

Study of the development of cells, organs and facial structures.

General & Oral Pathology **2 Sem. Hrs.**

Study of general and oral diseases.

Dental Hygiene I **1 Sem. Hr.**

Prevention and treatment of oral disease.

Clinical Dental Hygiene I **6 Lab., 2 Sem. Hrs.**

Practical experience in clinic.

Periodontics **2 Sem. Hrs.**

Prevention and treatment of periodontal disease.

Pharmacology and Emergencies **3 Sem. Hrs.**

A study of properties, dosage, actions and reactions of drugs. Principles of first aid and emergency procedures. Dental Hygiene and Dental Assisting students only.

Dental Hygiene II **1 Sem. Hr.**

Study of secondary preventive measures.

Clinical Dental Hygiene II **12 Lab., 4 Sem. Hrs.**

Practical experience in clinic.

Dental Practice Orientation **2 Sem. Hrs.**

Ethics and jurisprudence, office procedures and management.

Dental Health Education **2 Sem. Hrs.**

Teaching preventive dental health to groups. Dental public health.

Clinical Dental Hygiene III **1 Lect., 9 Lab., 4 Sem. Hrs.**

Increased practice in all areas of clinical dental hygiene including roentgenology and patient education.

Dental Specialties **1 Lect., 6 Lab., 3 Sem. Hrs.**

DH Lab., practice in expanded duties.

Dental Materials **1 Lect., 3 Lab., 2 Sem. Hrs.**

Principles of and practice in the physical and chemical properties of dental materials.

Oral Radiology **2 Lect., 3 Lab., 3 Sem. Hrs.**

Theory, demonstration, practice and interpretation of intra-oral radiographs. Radiation safety.

APPENDIX V

RURAL HEALTH CORPORATION OF LUZERNE COUNTY

Dr. Byron L. Rinehimer, Jr., President
Luzerne County Community College
Prospect Street and Middle Road
Nanticoke, Pennsylvania 18634

Dear Dr. Rinehimer:

The Rural Health Corporation of Luzerne County is a non-profit corporation providing medical, dental and social services to the outlying areas of Luzerne County. Our funds are generated from two sources:

1. the federal government through a Health, Education and Welfare grant,
2. patient income (cash, Department of Public Assistance, insurance, etc. . . .)

We provide services to all socio-economic levels of the population, and at the present time, we have 16,000 registered patients who receive care in our facilities at least once a year.

Our dental staff consists of 4 general dentists, 1 registered nurse, 1 hygienist (need more), 1 laboratory technician, 8 assistants (expanded duty training needed), and 4 secretaries. We also have a dental extern (4th year student) from the University of Pennsylvania with us for three week intervals to train in facilities far removed from the school clinic environment. This program has been sanctioned by Malcolm A. Lynch, D.D.S., M.D., Assistant Dean and Director of Extramural Affairs of the School of Dental Medicine.

We have 9 operatories for general dentistry and oral hygiene. Six of these have ultra speed dental x-ray units. Laboratories, dark rooms, and autoclaving areas are also included. In the future we anticipate opening another dental center in the southern portion of the county. We also anticipate building a multi-operatory facility for the team dentistry approach. These projects depend upon receiving funds.

We feel that your program is greatly needed in this area and we will work with you to the best of our ability to make both of our projects successful.

Sincerely,
Richard T. Lamping
Project Administrator
Robert F. Goulstone, D.M.D.
Dental Director

LUZERNE COUNTY DENTAL SOCIETY

Byron L. Rinehimer, President
Luzerne County Community College
Prospect Street and Middle Road
Nanticoke, Pennsylvania 18634

Dear Dr. Rinehimer:

I have been instructed by the Board of Directors of the Luzerne County Dental Society to write to you to indicate our support of the Luzerne County Community College's plan to initiate an Associate Degree program in Oral Hygiene and a one year training program for Dental Assistants.

Our primary need is hygienists because no institution of higher learning in our area has such a program. Our students who leave the area to train, seldom return to fill our requirements. Therefore, it is imperative that we train these students locally and encourage them to remain in the area to join our local professional dental teams.

The training of dental assistants would be extremely beneficial, especially if expanded duties were taught. More of our population will be able to receive dental care, which is so needed, if these para-professionals also joined our local professional dental teams.

The Luzerne County Dental Society is in favor of your program and will support your efforts in any way that seems most beneficial to you.

Sincerely,

Robert F. Goulstone, D.M.D.
Secretary
Luzerne County Dental Society

HAZLETON DISTRICT DENTAL SOCIETY

Byron L. Rinehimer, President
Luzerne County Community College
Prospect Street and Middle Road
Nanticoke, Pennsylvania 18634

Dear Dr. Rinehimer:

I have been instructed by the members of the Hazleton District Dental Society to indicate to you our full support of the proposed Associate Degree Program in Oral Hygiene and the one year Training Program in Dental Assisting by the Luzerne County Community College.

The dentists in Luzerne County have experienced many difficulties in locating and hiring qualified auxiliary personnel. Programs such as those proposed by Luzerne County Community College would serve not only to alleviate one of the major problems facing the dental profession, but even more importantly, would be of great benefit and service to the community. The past several years have seen a rise in the demand for dental care by the American public. One of the surest ways to meet this demand is the training of qualified dental auxiliaries who, working in conjunction with the dentist, could serve a greater proportion of the population than is presently possible.

It is a credit to your administration that you are actively considering the development of these programs, and we wish to compliment you on your foresight and commitment to the needs of the community. Furthermore, we will assist you in any way possible to achieve your goals.

Sincerely,

Alfred J. DeRenzis, D.M.D.
President
Hazleton District Dental Society

APPENDIX VI

FACILITIES REQUIREMENTS FOR AN ACCREDITATED DENTAL HYGIENE EDUCATION PROGRAM*

Physical facilities and equipment should be adequate to permit achievement of dental hygiene program objectives. It is expected that the institution will assess facilities and equipment periodically in relation to current concepts of dental and dental hygiene practice and make appropriate modifications.

Administrative and faculty offices; clinical, radiography and laboratory facilities; classrooms and locker room facilities should be provided. Facilities should effectively accommodate the number of students, faculty and staff and include appropriate provisions for safety. Overcrowding in facilities or inadequacies in equipment will be considered as factors operating against the attainment of program objectives.

Clinic: An adequate clinic facility includes an appropriate number of clinic stations, conveniently located handwashing sinks, space and equipment for sterilizing instruments and supplies, and storage space. It is expected that the capacity of the clinic will accommodate individual student practice on a regularly scheduled basis throughout all phases of preclinical technique and clinical instruction. Adequacy of the clinic capacity will be determined on the basis of the extent to which each student has sufficient clinical practice experience to develop proficiency in performing all clinical procedures and techniques.

The area provided for each clinic station should accommodate functional modern equipment with space for operating from a sitting position with instructor supervision. It is expected that units, chairs and support equipment will enable the application of current concepts of patient and operator positioning.

Storage space and sterilizing equipment should be in balance with the clinic capacity. The sterilizing area should include space for preparing, sterilizing and storing instruments. Sterilizing equipment should be adequate to assure practice of currently accepted procedures for preventing transmission of disease.

* Approved by the House of Delegates, American Dental Association, November, 1973.

An emergency kit equipped for use in managing emergencies which may occur in the clinic should be accessible and functional.

Space and furnishings for patient reception and waiting should be provided adjacent to the clinic.

Radiography Facilities: An adequate radiography teaching facility includes operatories for radiographic technique instruction and practice, radiography teaching manikins, a darkroom, an area for mounting and viewing radiographs, and accessible and safe storage area for film. The facility capacity should accommodate first and second year students for initial technique instruction and practice, and on-going practice with patients.

The number of dental radiography operatories should be based on the number of students enrolled in the program. Each student should have adequate opportunity for technique instruction and practice with faculty supervision to develop competency in exposing diagnostically acceptable dental radiographs. It is expected that there will be sufficient flexibility in scheduling students' practice to allow adequate time for developing proficiency in making radiographic surveys.

Radiography operatories should be large enough for use in demonstration and supervised practice of techniques, and should be equipped with adequately filtered and collimated modern dental radiography units. Handwashing sinks should be located in, or adjacent to, the radiography operatories.

It is expected that the design and construction of radiography operatories will provide maximum protection from x-radiation for students, personnel and patients. Lead shielding or comparable protection must be provided in the radiography teaching area.

The darkroom capacity and equipment should provide for simultaneous use by several students. Processing tanks, hanging racks and film driers should be adequate to assure that films will not be damaged or lost.

The area for mounting and viewing radiographs should accommodate several students and be equipped with view boxes. View boxes also should be available in the clinic.

Laboratory: A laboratory should be provided for instruction in the manipulation of dental materials. An adequate laboratory facility for a dental hygiene program includes an appropriate number of student stations, space for individual student performance of lab-

oratory procedures with instructor supervision, and storage space. The location of equipment should be conducive to efficient and safe utilization. Safety devices and equipment should be installed and functional. Laboratory stations should be designed and equipped for students to work while seated and include adequate lighting, necessary utilities and storage space.

Extramural Facilities: Extramural resources such as clinics for the physically and mentally handicapped, nursing homes, municipal and private hospitals, Veterans Administration Hospitals and federal services clinics, community health centers and mobile dental clinics may be used to enrich the on-campus facilities. However, campus facilities must be used to meet basic program objectives. When extramural resources are used for such enrichment the facilities and equipment should support effective achievement of the objectives for the extramural experience.

APPENDIX VII

GUIDELINES FOR USE OF EXTENDED CAMPUS FACILITIES IN DENTAL HYGIENE EDUCATION

Although it is preferable and therefore recommended that the educational institution provide a dental hygiene clinic, in some circumstances the institution may contract for use of an existing facility that is readily accessible to the campus. When the institution contracts for use of a clinic facility it is essential that specific requirements for administration, faculty, equipment, patients and instruction be met. The contract may or may not include a financial commitment on the part of the college. It is expected that the following provisions will be included in the formal agreement between the educational institution and the agency or institution providing the clinic facility.

1. The clinic will be considered an extension of the campus, and the educational institution and the dental hygiene program administrator will retain administrative authority and responsibility for instruction.
2. All dental hygiene students will receive instruction in the same facility.
3. Policies and procedures for operation of the clinic will be consistent with the philosophy of the dental hygiene program.
4. Policies of the agency or institution providing the facility will allow students to gain experience with patients of all ages and types, and the dental hygiene program administrator and faculty will retain authority for determining the numbers and types of patients assigned to students.
5. The facility will meet standards for capacity, space, equipment and maintenance as stated in the facilities section of the "Guidelines for Interpretation of Requirements for an Accredited Program in Dental Hygiene Education."
6. Clinical instruction will be the responsibility of a full-time dental hygiene program faculty member. Teaching personnel provided by the agency or institution will have appointments in the dental hygiene program and will possess qualifications specified in the faculty section of the "Guidelines

for Interpretation of Requirements for an Accredited Program in Dental Hygiene Education."

7. Faculty-student ratios for instruction and practice sessions will meet the standards outlined in "Guidelines for Interpretation of Requirements for an Accredited Program in Dental Hygiene Education."
8. The availability of the facility will accommodate scheduling needs of the dental hygiene program, and the dental hygiene faculty will have authority for scheduling.
9. In-service programs will be provided on a regular basis to orient personnel in the clinic facility, and coordinate student instruction and evaluation.
10. Two years notice shall be given by either party to terminate the contract unless a shorter period is agreed to by both parties.

APPENDIX VIII

BUDGET REQUIREMENTS FOR A COOPERATIVE DENTAL ASSISTANT PROGRAM AT LUZERNE COUNTY COMMUNITY PROGRAM
(Utilizing an existing clinical facility)

One Year Program

Budget Expenditure	Number of Personnel Required	Estimated Salary	Total Budget Costs
Executive Director (Dentist, Part-Time)	1	$ 8,000	$ 8,000
Program Director	1	13,500	13,500
Faculty	1	10,000	10,000
Secretary	1	5,000	5,000
Total Personnel	**4**	**$36,500**	**$36,500**
Fringe Benefits			5,400
Other Operating Costs (Supplies, Travel, Advertising, Accreditation)			3,700
Total Operating Costs			**$45,600***
Capital Costs:			
Furniture and Equipment			20,000
Total Costs			**$65,600**

* Operating cost per student $1,900 per year for 24 students.

Budget Summary
Dental Assistant Program

Explanations and Accounts	First Year
I. INCOME:	
Local Sources	$20,800
Commonwealth of Pennsylvania	25,600
Student Funds	13,200
Federal Funds	6,000
Total Income	**$65,600**
II. EXPENDITURES:	
Operating	$45,600
Capital	20,000
Total Expenditures	**$65,600**

APPENDIX IX

BUDGET REQUIREMENTS FOR A DENTAL ASSISTANT AND DENTAL HYGIENIST PROGRAM AT LUZERNE COUNTY COMMUNITY COLLEGE

Budget Year	Budget Expenditure	Number of Personnel Required	Estimated Salary	Total Budget Costs
1st Year	Executive Director (Full-Time Dentist)	1	$20,000	$20,000
	Project Director	1	13,500	13,500
	Faculty	2½	10,000	25,000
	Secretary	1	5,000	5,000
	Total Personnel	5½		**$63,500**
	Fringe Benefits			9,500
	Other Operating Costs (Supplies, Travel, Advertising, etc.)			8,600
	Total Operating Costs			**$81,600***
	Capital Costs:			
	Building			180,000
	Furniture and Equipment			252,000
	Total Operating and Capital Costs			**$513,600**

* Operating cost per student $1,700 per year for 48 students in first year of program.

Budget Year	Budget Expenditure	Number of Personnel Required	Estimated Salary	Total Budget Costs
2nd Year	Executive Director (Full-Time Dentist)	1	$22,000	$22,000
	Project Director	1	14,850	14,850
	Faculty	4½	10,555	47,500
	Secretary	1	5,500	5,500
	Total Personnel	7½		**$89,850**
	Fringe Benefits			13,500
	Other Operating Costs (Supplies, Travel, Advertising, etc.)			9,000
	Total Operating Costs			**$112,350***
	Capital Costs:			
	Furniture and Equipment			3,000
	Total Operating and Capital Costs			**$115,350**

* Operating cost per student $1,728 per year for 65 students in second year of program.

DENTAL ASSISTANT/HYGIENIST PROGRAM
CAPITAL FURNITURE/EQUIPMENT REQUIREMENTS

Room or Area Furniture/ Equipment Required	Number of Rooms	Cost of Furniture/ Equipment
Operatory (16 stations @ $10,000)	1	$160,000
($4,000 for minor equipment)		4,000
X-ray Rooms	3	25,000
X-ray Developing Room	1	5,000
Viewing Room	1	1,500
Supply Room	1	5,000
Office and Reception Area	2	2,500
Storage Room	1	1,500
Faculty Area	4	2,000
Locker Room (75 lockers)	1	7,500
Instructional Equipment	0	18,000
Dental Laboratory	1	20,000
TOTAL FURNITURE/EQUIPMENT		**$252,000**

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Budget Summary
Dental Assistant and Dental Hygienist Program

Explanations and Accounts	First Year	Second Year
I. INCOME:		
Local Sources	$237,600	$ 30,780
Commonwealth of Pennsylvania	247,200	43,750
Student Funds	26,400	35,750
Federal Funds	2,400	5,070
Total Income:	**$513,600**	**$115,350**
II. EXPENDITURES:		
Operating	$ 81,600	$112,350
Capital	432,000	3,000
Total Expenditures:	**$513,600**	**$115,350**

APPENDIX X

NUMBER, TYPE, AND REPRESENTATIVE SAMPLE OF COMMENTS INCLUDED WITH SURVEY QUESTIONNAIRE — LUZERNE COUNTY

A. Definitely Positive Comments (45 received; 17 listed below)

"With the definite third party movement, trained dental auxiliaries is a definite must. It will not only enhance the profession but will be of value to the general public, in that more patients will receive treatment who are now turned away by busy schedules."

"Northeastern Pennsylvania is most fortunate in the potential of having a program for the training of dental hygienists and dental assistants. At present and in the main a girl has only the possibility of being trained in this county as a typist, sewing machine operator, school teacher or nurse.

Community College publicity if offering courses as a D.H. & D.A. will initiate the desire and demand for this education. Probably what will stimulate this vocation to a greater degree will be the advent of the state hospital complex in the Plains Area. People will naturally become more health conscious and the oral segment will not be neglected. I understand that the Northampton Community College after a slow beginning has over 100 applications for the Fall term."

"The idea is an excellent one and there is a great need in our area for trained personnel.

The dental assistant would have several immediate employment opportunities; the hygienist due to the greater salary demand would probably be shared by two or more dentists, a few days a week in each dentist's office."

"I think an educational program such as this would be an asset to the community and the dental profession. I believe that many young ladies that attend nursing school, if given the opportunity, would chose a career in the field of dentistry. A local institution offering such a program would be an attractive incentive to young girls seeking a career in the professions."

"Excited — especially for the expanded duties aspect. I worked with them at 'Pitt' and in the Air Force. I feel that expanded functions is the only way to go. Please let me know if I can help in any way. I am also excited about the hygiene program. I would love to send one of my girls for the hygiene program."

"I think it is absolutely necessary in view of the projected picture of 'Dentistry', and inflationary trends. In order to adequately deliver dentistry to all within a reasonable cost (as will be demanded by "third party"), we, or 'Dentistry', will have to function with assistants with 'Expanded Duties'."

"There is a great need for dental auxiliaries in this and adjoining counties. One area of this need is within our school systems — many school districts are operating without the services of hygienists and where hygienists are employed the emphasis has been in the Kindergarten to 5th or 6th grade — these are technically the formative and well supervised years — yet when all of the permanent teeth are in place the children are not examined at the schools nor do they have attention to get frequent check-ups by dentists. As a result many teeth are lost because the emphasis and reminding of good hygiene are no longer stressed during the all important teenage years."

"The need for trained dental personnel in the area warrants the programs of dental hygiene and assistants at your college.

I do wish to be informed of your progress."

"Super! We need many good professionals who are properly trained in this area."

"I would most enthusiastically support such a program. If such a program were offered, it would not only provide a service to the dental community in particular, but to the residents of Luzerne and Lackawanna counties in general."

"I feel the greatest need is for hygienists. Men are reluctant to employ a hygienist and gear their practices accordingly. Should a practice employ a hygienist, and should the hygienist leave for whatever cause, it is generally impossible to find a replacement. If a greater selection of hygienists was available

and if replacements were available I believe more men would employ hygienists.

Care should be taken in the admission of trainees. A high caliber, well motivated, intelligent, responsible, personable, capable individual should be selected. To have someone in name only will defeat the program. Standards must be high. This applies as well to assistants."

"I seea great need for trained dental auxiliaries in a modern dental program. These must be of very high quality otherwise the program will be worthless as some of the other programs in the area have been. Generally, I think it is an excellent idea and will get my 100% support."

"Excellent idea — would form a good nucleus of initially trained personnel, especially for expanded duties. Salaries mentioned here would be for initial trial period — as duties expanded, salaries would increase proportionately, especially for those well-qualified for expanded duties. Fringe benefits include life insurance, long-term disability insurance, pension plan, profit-sharing plan, paid holidays and vacations according to length of employment.

Classes for dental hygienists also excellent idea, but question whether or not demand is sufficient. Perhaps this survey will give some idea. I can use another dental hygienist full-time within next year."

"I am very pleased to see this program developing and would be most happy to assist in any way possible to make this a success."

"A definite need that has been 'grossly' overlooked when the size of the area is compared with a comparable metropolitan area."

"I think more men would use them if there were a ready supply available, especially those in solo practice who hate to take the time and energy necessary to train one on their own."

"I believe it is a long needed program. I can see no detriment to getting it started as soon as possible."

"I feel that a program of this type is long past due. Modern progressive dental offices depend greatly on auxiliary personnel. When one leaves, the training of a new auxiliary is a time consuming, expensive procedure. I feel this type of program would benefit dentistry and the community as a whole."

"It has been my experience in the past that it is impossible to hire an oral hygienist at any salary. We need these people badly. Prevention is the key to the successful dental practice of the future and the hygienist should be the leader of the preventive team.

Our organization is aiming toward team dentistry. We will need five or more trained expanded duty assistants per dentist. As we move into the era of providing health care to all citizens regardless of socioeconomic status, team approach will be a necessity to overcome the dental manpower shortage."

"We need a program such as this one — Good for the area! Especially to facilitate expanded duties."

B. Qualified Positive Comments (total of 6 received — all listed below):

"Six dental hygiene students per year (or class) would probably be sufficient."

"I believe this would be an excellent program, providing that there would be a fairly high standard of admission to the course.

Also that the extern program would be viable and not abused. Clinical experience would be a great benefit to the pupil."

1. *Seems like a good idea — especially for additional training offered to presently employed auriliaries.*
2. *I wonder if there will soon become an overabundance of newly trained assistants and/or hygienists. There doesn't seem to be enough dentists in this area to absorb these new auxiliaries in such large numbers.*
3. *It seems like a very convenient place for a live-at-home trainee.*
4. *Good luck — Hope it works well if it ever becomes a reality.*

"It could be an excellent program if the output of graduates were consistent with the need for same.

I can conceive an overproduction of these auxiliaries in a market consisting primarily of older dentists not receptive to hygienists in their offices and certainly not to expanded duties now permitted.

If, however, this program were not overlapped by a similar one in surrounding counties . . . the girls could conceivably secure ready employment in the larger area being served. I, for one, would hope to see the program become a reality."

"I would be interested if the dental assistants could be trained to 'fit into' my specialty, 'orthodontics'."

"Training dental auxiliaries is fine, if it is confined to the following: (1) chair assistance (2) radiographs — developing (3) lab procedures (4) office management (5) patient relationship. I am not in favor of expanded duties."

C. Negative Comments (total of 2 received — all listed below):

"Please do not flood the market with trained personnel that will have no job openings, especially in our no growth area."

"Not necessary to jeopardize good dentistry with expanded duties of auxiliary personnel. Until adequate training and testing is accomplished, I think it is dangerous to allow auxiliaries too much responsibility. A dentist who has self-trained expanded duty personnel can be prejudiced into allowing his personnel too much freedom."

APPENDIX XI

POSITION DESCRIPTION FOR DENTAL AUXILIARY EDUCATION PROGRAM DIRECTOR

A. Be responsible to the Dean of Academic Services for providing leadership in the instructional program and for the following areas.

1. Assuming major responsibility for the development, implementation, supervision, evaluation and revision of the dental hygiene and dental assisting curriculum and programs in the area of community service and continuing education.
2. Making recommendations concerning the employment, advancement, retention and tenure of members of the dental hygiene and dental assisting staff.
3. Preparation and administration of the budget of the unit of dental hygiene and dental assisting.
4. Supervision and coordination of the ordering of textbooks and supplies for dental hygiene and dental assisting courses.
5. Providing leadership in the planning and purchase of library books and other instructional resources necessary to the implementation of the instructional program.
6. Cooperating in the development of orientation programs for new faculty, part-time faculty and substitutes for dental hygiene and dental assisting.
7. Scheduling regular meetings of the dental hygiene and dental assisting faculty and maintaining accurate minutes.
8. Teaching Introduction to Dental Hygiene and Chairside Assisting and other courses qualified to teach.
9. Supervision and teaching in the clinic.
10. Ordering all clinic supplies and selecting and ordering freshman instruments.
11. Developing and coordinating a dental specialties course for use in dental offices in which students will observe and participate.

12. Recruiting guest lecturers.
13. Developing and maintaining satisfactory relationships with:
    A. The College administration.
    B. Other units of the College.
    C. Community groups.
    D. Appropriate state, regional and national agencies.
14. Preparing agenda for and attending Advisory Committee meetings.
15. Continually reviewing course content to keep up with latest clinical teaching techniques and expanded duties.
16. Development of a referral program to ensure that students who require counseling are directed to the appropriate staff members.
17. Serving as faculty advisor to students.
18. Assistance with recruitment, interviewing and selection of students.
19. Preparing a profile of new students.
20. Control and annual inventory of the physical property of the program.
21. Administration of the budget when approved.

B. Accept such other responsibilities as may be assigned by the Dean of Academic Services.

UNIVERSITY OF CALIF.
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